



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240-8101

BOARD OF SUPERVISORS

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First District

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September 18, 2003

Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

**REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT
(ALL DISTRICTS AFFECTED - 3 VOTES)**

IT IS RECOMMENDED THAT YOUR BOARD:

Authorize the Director of Health Services or his designee to accept the attached compromise offers of settlement, pursuant to Section 1473 of the Health and Safety Code, for the following individual accounts for patients who received medical care at a County facility:

| | |
|------------------------------|-----------|
| (1) Account Number - 9202301 | \$184,000 |
| (2) Account Number - 5295534 | \$ 23,099 |
| (3) Account Number - 5450174 | \$353,775 |

PURPOSE OF THE RECOMMENDED ACTION:

The compromise offers of settlement for patient accounts (1) - (3) are recommended because the amounts are the highest amounts that could be negotiated with the patients' insurance (Commercial or HMO) under the circumstances of the case, and receipt of such insurance proceeds prevents further collection from the patients, except for possible beneficiary coinsurance or deductible obligations.

JUSTIFICATION:

The best interests of the County would be served by the approval of these compromises since it will enable DHS to maximize net revenue on these accounts.

FISCAL IMPACT:

This will expedite the County's recovery of partial payments totaling approximately \$560,874 from three patients' insurance (Commercial or HMO) companies for the medical care provided.

FINANCING:

Not applicable.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

On January 8, 2002 the Board approved an ordinance granting the Director of Health Services (Director) authority to reduce patient account liabilities when in the best interest of the County. The ordinance was adopted by the Board on January 15, 2002.

Under County Code Chapter Section 2.76.046, the Director has the authority to reduce patient account liabilities by the greater of i) \$15,000, or ii) \$75,000 or 50% of the account balance, whichever is less. Any reduction exceeding the Director's authority requires Board approval.

The compromise of these accounts is not within the Director's authority, so the Director is requesting Board approval of these compromises.

CONTRACTING PROCESS:

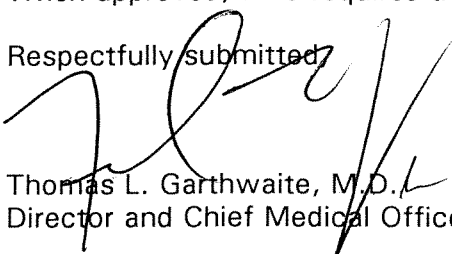
Not applicable.

IMPACT ON CURRENT SERVICES (OR PROJECTS):

Maximizing net revenues on these accounts will help DHS to meet its budgeted revenue amounts.

When approved, DHS requires three signed copies of the Board's action.

Respectfully submitted,


Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

TLG:lg (R:\Astecker\Compromise 3rd LtrSeptember03#2\Compromise091803.WPD)

Attachments

c: Chief Administrative Officer
County Counsel
Executive Officer, Board of Supervisors

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 1
DATE: September 18, 2003

| | | | |
|----------------------------------|-----------|------------------------|------------------------|
| Total Charges | \$266,475 | Account Number | 9202301 |
| Amount Paid | \$0 | Service Type | Inpatient |
| Balance Due | \$266,475 | Date of Service | 06/01/2003-07/01/2003 |
| Compromise Amount Offered | \$184,000 | % Of Settlement | 69% of Gross Charges |
| Amount to be Written Off | \$82,475 | Facility | LAC+USC Medical Center |

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 2
DATE: September 18, 2003

| | | | |
|----------------------------------|-----------|------------------------|-----------------------|
| Total Charges | \$110,436 | Account Number | 5295534 |
| Amount Paid | \$0 | Service Type | Inpatient |
| Balance Due | \$110,436 | Date of Service | 02/07/2003-02/19/2003 |
| Compromise Amount Offered | \$23,099 | % Of Settlement | 21% of Gross Charges |
| Amount to be Written Off | \$87,337 | Facility | H/UCLA Medical Center |

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case. The patient is a Canadian Citizen and his insurance policy only reimburses the prevailing U.S. Medicare DRG rate. The amount offered is 100% of the DRG for the services provided.

DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES

TRANSMITTAL No. 3
DATE: September 18, 2003

| | | | |
|----------------------------------|-----------|------------------------|-----------------------|
| Total Charges | \$471,697 | Account Number | 5450174 |
| Amount Paid | \$0 | Service Type | Inpatient |
| Balance Due | \$471,697 | Date of Service | 04/23/2003-06/12/2003 |
| Compromise Amount Offered | \$353,775 | % Of Settlement | 75% of Gross Charges |
| Amount to be Written Off | \$117,922 | Facility | H/UCLA Medical Center |

JUSTIFICATION

The above compromise offer of settlement is the highest amount that could be negotiated with the patient's insurance (Commercial or HMO) under the circumstances of the case.